

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morahan  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P94000009046 (1)**  
1. Corporation Name  
**AFFORDABLE HOUSING NATIONWIDE, INC.**

Principal Place of Business Mailing Address  
**17529 NE 148TH TERRACE RD. FT. MCCOY FL 32134** **P.O. BOX 3307 BELLEVUE FL 34421-3307**

2. Principal Place of Business 2a. Mailing Address  
21 **2855 S.E. 58TH AVE** 26 **2855 S.E. 58TH AVE**  
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.  
23 **OCALA, FL** 28 **OCALA, FL**  
24 **34471** 25 **MARION** 29 **34471** 30 **MARION**

9. Name and Address of Current Registered Agent  
**MCKENZIE, GREGORY S  
17529 NE 148TH TERRACE RD.  
FT. MCCOY FL 32134**

**APPROVED AND FILED**  
**95 FEB 10 AM 8:31**  
**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.  
3. Date Incorporated or Qualified **02/04/1994** 3a. Date of Last Report  
4. FEI Number **59-3292560** Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

10. Name and Address of New Registered Agent  
81 Name **JERRY L. WALKER**  
82 Street Address (P.O. Box Number is Not Acceptable) **2855 S.E. 58TH AVE**  
83  
84 City **OCALA** FL 85 Zip Code **34471**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Jerry L. Walker PRESIDENT DATE **8 FEB 1995**  
Signature typed or printed name of registered agent if not legible (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS	
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME
STREET ADDRESS	CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE <b>P</b>	1.2 NAME <b>JERRY L. WALKER</b>
1.3 STREET ADDRESS <b>2855 S.E. 58TH AVE</b>	1.4 CITY - ST - ZIP <b>OCALA, FL 34471</b>
2.1 TITLE	2.2 NAME
2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
3.1 TITLE	3.2 NAME
3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
4.1 TITLE	4.2 NAME
4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
5.1 TITLE	5.2 NAME
5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
6.1 TITLE	6.2 NAME
6.3 STREET ADDRESS	6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jerry L. Walker **JERRY L. WALKER** **8 FEB 95** **904620-2910**  
Signature typed or printed name of signing officer or director